http://www.ncdhhs.gov/control/pomcs/pomcs.htm

# SPECIAL BULLETIN

## Important Changes to Adult Cystic Fibrosis Program:

- Mandatory Prior Approval Review Process
- Revised Formulary

**February 2007** – Effective 7/1/07, the Adult Cystic Fibrosis (ACF) Program will only cover specific drugs related to the treatment of cystic fibrosis and its complications through a prior approval review process. All of the drugs that a cystic fibrosis client needs cannot be covered by this program due to limited funding and increasing requests.

#### Adult Cystic Fibrosis Program Information

Financially eligible clients with cystic fibrosis may qualify for cystic fibrosis related drug coverage under the Adult CF Program administered by the Department of Public Health (DPH). Details are available on the POMCS website at <a href="www.ncdhhs.gov/control/pomcs/pomcs.htm">www.ncdhhs.gov/control/pomcs/pomcs.htm</a>. A POMCS authorization request form (DHHS 3056) must be completed and signed by the prescribing physician and forwarded to POMCS for review for all needed drugs. All drugs must be individually listed. A written reply to the request will be mailed to the pharmacy, physician, and the patient. Pharmacies may provide a 3056 form to the physicians and this form is available at the following link: <a href="http://www.ncdhhs.gov/control/pomcs/3056.pdf">http://www.ncdhhs.gov/control/pomcs/3056.pdf</a>

#### **Prior Approval**

Effective 7/1/07, for new and continuing authorization requests (renewals), each client must have an authorized list of all specific medications approved through POMCS and on file at the pharmacy. Please check the ending date of your current authorization request.

Effective immediately, all current existing drug authorizations will also include those drugs listed on the formulary attached with this letter. The attached formulary is a list of commonly used medications and nutritional supplements for the treatment of cystic fibrosis or complications of cystic fibrosis. This formulary will change over time. Please check the POMCS web site for the most current medication list.

If a client needs a drug that is NOT on his/her authorized list and NOT on this formulary, a 3056 form for that specific drug must be completed and signed by the requesting physician. The physician should include information about how the requested drug is related to the client's cystic fibrosis.

Generic drugs should be requested as the drug of first choice when possible. Brand names for pancreatic enzyme supplements are an exception. Drugs that are not on the formulary (such as mental health and pain

medications) may be requested. All drug requests will be reviewed on a case by case basis to determine how the use of the drug is medically necessary for the treatment of the client's cystic fibrosis or its complications. Requests for all drugs (and especially controlled substances) need to be coordinated through one primary care provider or medical home.

#### For Current Authorizations:

Effective immediately, claims for drugs on the attached formulary will also be paid with a current drug authorization from the Adult Cystic Fibrosis Program.

Effective 7/1/07, those claims for specific drugs that do not have a current authorization and are not listed on the formulary will not be paid.

Questions or requests for additional information related to these changes should be directed to: Dr. Gerry Mattson, Medical Consultant, 919-707-5622, <a href="mailto:gerri.mattson@ncmail.net">gerri.mattson@ncmail.net</a>

## NC Adult Cystic Fibrosis Formulary (Medications)

Accolate 20mg tablet

Actigall 300 mg capsule

AccuNeb nebulization

AcipHex

. Acyclovir

**ADEK** vitamins

Advair diskus

Albuterol aerosol solutions

Albuterol sulfate nebulization

Albuterol sulfate tablets

Alendronate

Allegra

Amikacin

Amoxicillin

Amoxil

Amoxicillin clavulanate potassium

Augmentin in all forms except extended release

Azactam

Azithromycin

Azmacort aerosol for oral inhalation

Aztreonam

**Bactrim** 

Biaxin

Brethine injection solution and tablet

Budesonide nebulized solution and for oral inhalation

Calcium carbonate

Calcium citrate

Calcium gluconate

Ceftazidime infusion

Centrum vitamins

Cetirizine

Cipro in tablet and infusion forms

Ciprofloxacin in tablets and infusion forms

Citrucel capsules and powder forms

Clarithromycin

Colistimethate

Colistin

Combivent

Creon

Dicloxacillin

Doxycylcine in all dosage forms

DuoNeb

Esomeprazole for oral and nasogastric tube use

Fergon

Ferrous gluconate

Ferrous sulfate

Fish oil

Flonase

Flovent

Flovent HFA

Fluconazole

Flunisolide

#### Fluoxetine

### NC Adult Cystic Fibrosis Formulary (Mediacations)

Fluticasone salmeterol

Folic acid

Fortaz infusion

Fosamax

Furosemide injection and tablets

Gentamicin injection and infusion

GlycoLax powder

**GOLYTELY** 

Heparin IV flush 100 units/ml

Humalog pen, cartridge or vial

Humulin

Hypertonic saline for respiratory treatments

Imipenem cilastatin all injectable forms

Insulin aspart

Insulin glargine

Insulin lispro

Ipratropium bromide and albuterol aerosol and solution

Itraconazole

KCL

Lactulose

Lantus 100 units/ml vial and cartridge

Lasix

Levaquin infusion and tablet

Levofloxacin

Linezolid

Lipram

Magnesium oxide

Megace

Megestrol Acetate suspension and tablet forms

Meropenem

Merrem

Methylcellulose

Methylprednisolone

Metolazone tablets

Minocin

Minocycline capsules and tablets

MiraLax powder

Montelukast

Nasacort AQ nasal spray

Nasacort nasal spray

Nasarel

Nephrocaps

Neprho-Vite

Nexium for oral and nasogastric use

Normal saline for intravenous flush

Novolin

NovoLog

NPH insulin

Omeprazole

Oscal

Palcaps

Pancrease .

#### NC Adult Cystic Fibrosis Formulary (Medications)

Pancrease MT

Pangestyme

Pancrelipase

Phenergan

Phytonadione 5 mg tablet

Piperacillin and tazobactam sodium

Polyethylene glycol 3350

Polyethylene glycol

Prednisone

Prenatal plus tab

Prenate advance tablet

Prilosec

Primaxin

ProAir HFA

Promethazine

Protonix

Proventil aerosol solution

Proventil aerosol HFA solution

Pulmicort nebulized solution and for oral inhalation

Pulmicort TurbuHaler

Pulmozyme 1 mg/ml nebulization form

Ranitidine

Regular insulin

Saline for respiratory treatments

Salmeterol

Senna granules and tablets

Senokot granules and tablets

Septra

Serevent inhaler

Serevent diskus

Singulair

Slo FE

Sodium chloride 10% vial

Sodium chloride 3% vial

Sodium chloride solution 0.9%

Sterile water

Sterile water for injection flip top

Terbutaline injection solution and tablet forms

Theophylline

Ticarcillin clavulanate

Timentin

TOBI for nebulization

Tobramycin

Triamcinolone intranasal spray and aerosol for oral inhalation

Trimethoprim-sulfamethoxazole

Trimox

Ultracaps MT

Ultrase

Ultrase MT

Ursodeoxycholic acid

Ursodiol

Vancocin

## Vancomycin

## NC Adult Cystic Fibrosis Formulary (Medications)

Ventolin aerosol solution Ventolin HFA aerosol solution Vitamin B complex Vitamin D Vitamin K1 Vitamin E Vitamin A Zafirlukast

Zantac Zaroxolyn Zithromax Zosyn

Zyrtec Zyvox 6 70/30 insulin

## NC Adult Cystic Fibrosis Formulary (Formulas/Nutritional Supplements)

Skandishake
Ensure products
Boost products
Nestle's Carnation products
Novartis products
Pulmocare